

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Roseann Hicks</b>							
Full Name of Contributor <b>Contributors of \$25 or less</b>				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	6	1	\$185.00
City		State	Zip Code	Form (Cash, Check, etc.)			
		OH					
Full Name of Contributor <b>Carl Mosley</b>				Registration Number, if PAC			
Street Address <b>2284 Rolling Rock Dr.</b>		Employer/Occupation/Labor Organization* <b>Huntington Bank</b>		M	D	Y	Amount
				0	6	1	\$40.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43229</b>	Form (Cash, Check, etc.) <b>Cash</b>			
Full Name of Contributor <b>Diane Hendrickson</b>				Registration Number, if PAC			
Street Address <b>4476 Wanda Lane Rd.</b>		Employer/Occupation/Labor Organization* <b>Retired</b>		M	D	Y	Amount
				0	6	1	\$50.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43224</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Erwin Dulay</b>				Registration Number, if PAC			
Street Address <b>4073 Forest Edge Dr.</b>		Employer/Occupation/Labor Organization* <b>Boehringer Ingelheim</b>		M	D	Y	Amount
				0	6	1	\$30.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43230</b>	Form (Cash, Check, etc.) <b>Cash</b>			
Full Name of Contributor <b>Marilyn Bussard</b>				Registration Number, if PAC			
Street Address <b>4786 Glendon Rd.</b>		Employer/Occupation/Labor Organization* <b>NuSource</b>		M	D	Y	Amount
				0	6	1	\$100.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43229</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Wes Rahe</b>				Registration Number, if PAC			
Street Address <b>2050 Cannington Ct.</b>		Employer/Occupation/Labor Organization* <b>Delivery Driver</b>		M	D	Y	Amount
				0	6	1	\$30.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43229</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Michelle R. Coneglio</b>				Registration Number, if PAC			
Street Address <b>1824 Hess Blvd.</b>		Employer/Occupation/Labor Organization* <b>Columbus City Schools</b>		M	D	Y	Amount
				0	6	1	\$50.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43212</b>	Form (Cash, Check, etc.) <b>Check</b>			

\* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$ **\$485.00**